

PETITION NO. 00-22-03

DATE 8/31/22

**USE THIS FORM FOR REQUESTING A VARIANCE OF A ZONING REGULATION STANDARD**

**ZONING BOARD OF APPEALS**  
**TOWN PLANNER**  
**TOWN OF NEWINGTON**  
**200 Garfield St**  
**Newington, CT 06111**

Zone \_\_\_\_\_

Fee 320.00

Check # 2070

Applicant's Name: **Robin C. Zimmerman**

Email Address: robilyn@aol.com

Address: **161 Miami Ave. Newington, CT**

Phone: **860-690-5754**

Owner's Name: **Marc & Robin Zimmerman**

Address: **same as above**

Phone: **860-690-5754**

Address of affected premises: **161 Miami Ave. Newington, CT**  
(If business, state name)

Type of Variance: ( X ) Variance of Newington Zoning Regulations found in Table 4a  
Variance relates to: Use ( ) Area ( ) Height ( )  
Build Line ( X ) Sign ( ) Home Occupation ( )  
Existing Building ( )

On what portion of the Zoning Ordinance is the Petition based – Provide Section Number

**Section 4.5**

Specify details of Variance and describe nature of hardship:

**Please see next page for details.**

Has previous Variance been filed? If yes, provide date and nature of Variance

**No**

Owners Signature Robin C Zimmerman 8/30/22